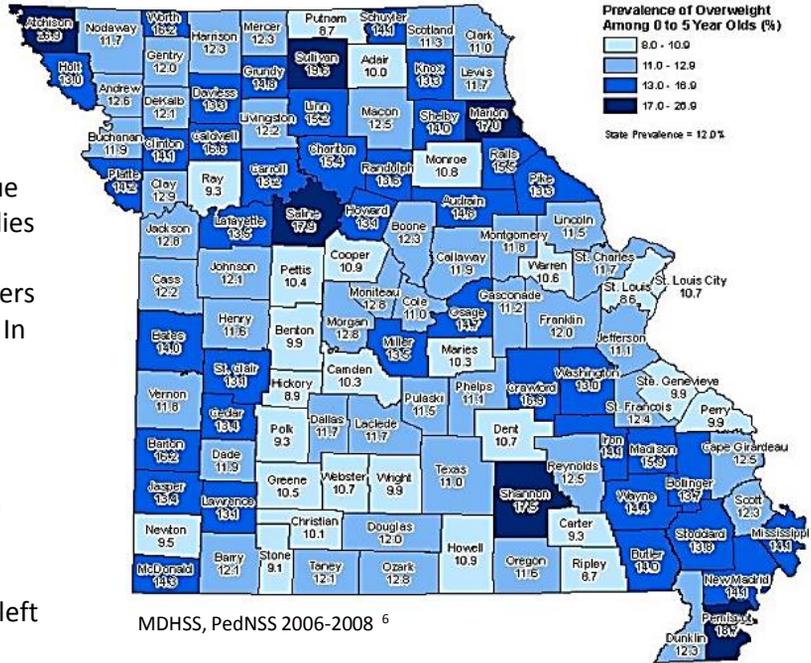




# Health in Rural Missouri

## Childhood Obesity May 2015

Figure 2: Prevalence of Overweight Among 0 - 5 Year Olds by County, Missouri PedNSS 2006-2008 Combined Years



MDHSS, PedNSS 2006-2008 <sup>6</sup>

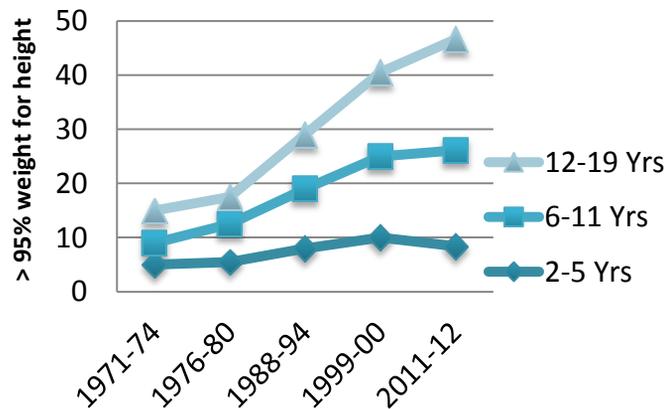
### Issue

The burden of childhood obesity is especially significant in the state of Missouri, specifically in rural areas. <sup>6</sup> (Figure 2) Many Missouri residents find it difficult to access treatment for obesity due to high costs and limited availability. Families in rural Missouri are especially at a disadvantage as the major treatment centers are in Kansas City, St. Louis and Columbia. In addition, children in rural Missouri face numerous environmental barriers when addressing obesity. Rural areas lack open public spaces, less access to healthy food, have limited transportation options, and a higher burden of poverty. Enhanced preventative strategies and early interventions are critical. When obesity is left untreated, children are at higher risk for developing health conditions and have a 70-80% chance of remaining obese into adulthood. The cost of treating obesity and the related health risks are substantial. <sup>5</sup> A comprehensive, community based approach, in combination with policy interventions, are essential in addressing the growing epidemic. <sup>8</sup>

### Evidence

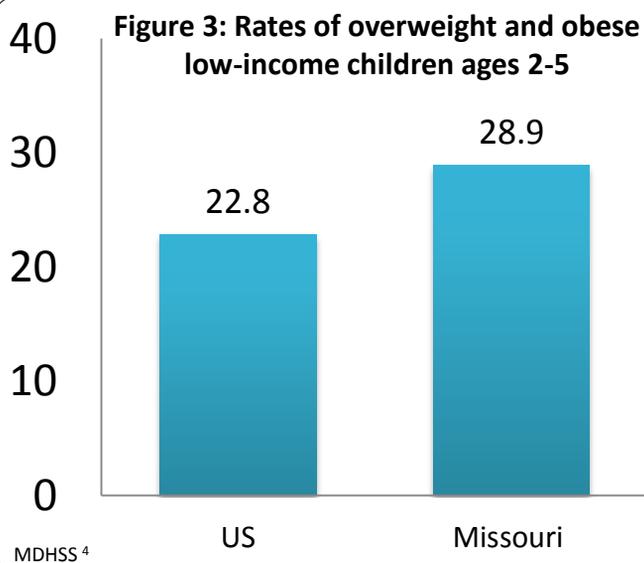
- Missouri is ranked 34<sup>th</sup> in the nation for obesity. <sup>2</sup>
- 28% of 10-17 year olds in Missouri are overweight or obese. <sup>4</sup>
- 28.9.% of low-income 2-5 year olds in Missouri are overweight or obese, compared with a national rate of 22.8%. <sup>4</sup> (Figure 3)
- 19.1% of low-income 2-5 year olds in Missouri have a higher risk of becoming overweight. <sup>3</sup>
- Since the 1970s, the number of overweight children in the U.S. has doubled for ages 2-5, tripled for ages 12-19, and quadrupled for children ages 6-11. <sup>5</sup> (Figure 1)
- Children in rural areas are 25% more likely to be overweight or obese than children in urban areas. <sup>4</sup>
- A significantly higher percentage of rural Missourians (32.3%) are considered obese in comparison with urban Missourians (28.9%). <sup>3</sup> (Figure 4)
- Obesity-related health care costs in Missouri average \$1.6 billion annually. <sup>5</sup> (Figure 5)

Figure 1: U.S. Youth Overweight Rates

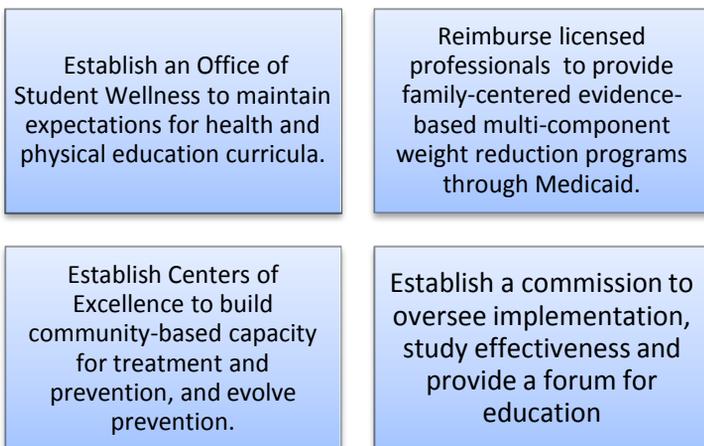


## Taking Action

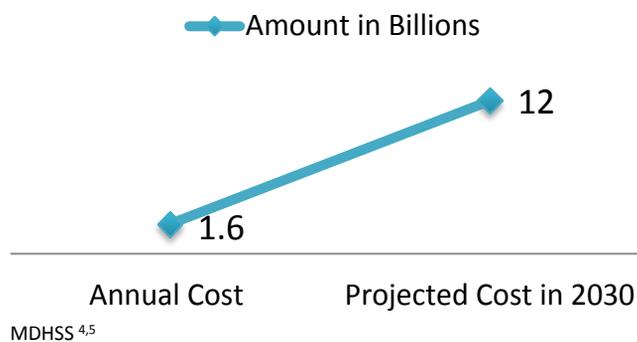
- The Missouri Children’s Service Commission, Subcommittee on Childhood Obesity, recommends a strategic dual action approach focused on prevention and treatment. <sup>4</sup> (Figure 4)
- The Missouri Foundation for Health (MFH) has developed Healthy Schools Healthy Communities (HSHC); a five year, three-tiered approach to increase physical activity and healthy eating; engage parents and stakeholders to promote health and wellness in communities, families, and schools; and implement and enforce environmental and policy changes to support physical activity and healthy eating. Ten of the 12 areas MFH is focusing interventions in are rural counties. <sup>7</sup>
- In coordination with 81 partnering organizations, including the Missouri Department of Health and Senior Services (MDHSS), the Missouri Council for Activity and Nutrition (MoCan) has devised a strategic plan to prevent obesity and other chronic diseases. The strategy consists of four main goals and their specific plans of action, with an overall goal of decreasing obesity among children, youth and adults in Missouri. The vast majority of interventions are focused in lower-income, high need, rural regions of Missouri. <sup>1</sup>



**Figure 4: Potential policy actions to improve children’s health**



**Figure 5: Obesity-Related Health Care Cost in MO**



## Conclusion

Reversing childhood obesity is essential to enhance the quality of life, prevent the development of disease, and decrease obesity-related medical expenses. Sustainable lifestyle interventions, medical interventions, changes in current policy, community involvement and environmental changes are critical to reducing the prevalence of childhood obesity and the associated health risks. It is important that rural Missourians are provided with the education and tools that enable healthy decisions. With the discussed action plans, Missouri has the potential to be a leader for other rural areas facing similar childhood obesity issues.

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